



Department of
Land Use & Transportation

WASHINGTON COUNTY

SUPPLEMENTAL REQUIRED SIGNATURES FORM (FOR PERMIT APPLICATION)

JOB SITE INFORMATION AND LOCATION

Job address: _____

City/State/ZIP: _____

DESCRIPTION OF WORK

(Must match Building and Development Application Services application)

Supervising Electricians Signature (Required)

Print Name: _____ Date: _____

Authorized Signature: _____